

646.3011

Work Order ID 113799

B113799

\*113799\*

Page 1

February-24-14 10:03:57 AM

Item ID: 646.3011

Revision ID:

Item Name: RH Half

Start Date: 2/24/14

Start Qty: 8.00

\*8\*

Required Date: 2/24/14

Req'd Qty: 8.00

\*8\*

Reference:

Accept

\*N900040100\*

Setup Start

\*NS1\*

Stop

\*NS2\*

Cust Item ID:

Customer:

Approvals:

Process Plan: ML5Date: 14-02-26

Tooling:

Date:

Run Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

Draw Nbr

Revision Nbr

646.3000

N/C

100

\*100\*

Bandsaw

Jeaspa Bandsaw

BAND SAW

Memo.

Cut Blank at 9.700"

0.00

0.00

110

\*110\*

HAAS 1

HAAS CNC vertical machine #1

HAAS CNC VERTICAL MACHINING #1

Memo

1-Machine per folio FB158

DWG REV: N/CFOLIO REV: AA

2- deburr and break all sharp edges

0.00

0.00

DAS  
14  
9-89

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

201

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other    
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**Work Order ID 113799**

February-24-14 10:03:57 AM

**\*113799\***

Page 2

Item ID: 646.3011

Revision ID:

Item Name: RH Half

Start Date: 2/24/14

Start Qty: 8.00

**\*8\***

Required Date: 2/24/14

Req'd Qty: 8.00

**\*8\***

Reference:

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Stop

**\*NS2\***

Cust Item ID:

Customer:

Approvals:

Process Plan: \_\_\_\_\_

Date: \_\_\_\_\_

Tooling: \_\_\_\_\_

Date: \_\_\_\_\_

Run

Start

**\*NR1\***

QC: \_\_\_\_\_

Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

120

QC2- Inspect parts off machine FAI/FAIB

0.00

**\*120\***

QC

Memo

0.00

Quality Control

14/03/31

8

0

DAS  
14  
9-89

130

QC8- Inspect parts - second check

0.00

**\*130\***

QC

Memo

0.00

Quality Control

14-04-02

8

0

131

0.00

**\*131\***

HandFinish

Memo

0.00

Hand Finishing

CLEAN AND REMOVE ALL PART MARKING

N/A

14/04/02

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
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Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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**Work Order ID 113799**

February-24-14 10:03:57 AM

**\*113799\***

Page 3

Item ID: 646.3011

Revision ID:

Item Name: RH Half

Start Date: 2/24/14

Start Qty: 8.00

**\*8\***

Required Date: 2/24/14

Req'd Qty: 8.00

**\*8\***

Reference:

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Stop

**\*NS2\***

Cust Item ID:

Customer:

Approvals:

Process Plan:

Date:

QC:

Date:

Tooling:

Date:

SPC (Y/N):

Date:

Run Start

**\*NR1\***

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

140

Outsource process-Anodize per QSI017 4.1.10.1

0.00

**\*140\***

Outsource4

Memo

0.00

Outsource process - Anodize

Issue P/O to ATG : 23622

1- Black Anodize as per Dwg 646.3000

2- PRIME AS PER DWG, SEE NOTE #2

Certification of Conformity is required

CZ 14/04/03 8

150

Receive &amp; Inspect for Damage &amp; Mat'l Certs

0.00

**\*150\***

Packaging

Memo

0.00

Packaging

DAS  
27  
2-59

155

QC5- Inspect part completeness to step on W/O

0.00

**\*155\***

QC

Memo

0.00

Quality Control

14/4/1114/4/11 88

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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**Work Order ID 113799**

February-24-14 10:03:57 AM

**\*113799\***

Page 4

Item ID: 646.3011

Revision ID:

Item Name: RH Half

Start Date: 2/24/14

Start Qty: 8.00

**\*8\***

Required Date: 2/24/14

Req'd Qty: 8.00

**\*8\***

Reference:

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Stop

**\*NS2\***

Cust Item ID:

Customer:

Approvals:

Process Plan: \_\_\_\_\_

Date: \_\_\_\_\_

Tooling: \_\_\_\_\_

Date: \_\_\_\_\_

Run Start

**\*NR1\***

Stop

**\*NR2\***

QC: \_\_\_\_\_

Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

180

Identify as per dwg & Stock Location: H-P

0.00

**\*180\***

Packaging

Memo

0.00

Packaging

\*\*\*IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV\*\*\*

8 SAD 14/04/17

190

QC21- Final Inspection - Work Order Release

0.00

**\*190\***

QC

Memo

0.00

Quality Control

PL 14-4-17PL 14-4-17

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



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### FAULT CATEGORY

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# Picklist Print

February-24-14 10:03:57 AM

Page 1

Work Order ID: 113799

\*113799\*

Parent Item: 646.3011

\*646.3011\*

Parent Item Name: RH Half

Start Date: 2/24/14

Required Date: 2/24/14

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP REV:A NEW ISSUE 13/01/14 JFS VERIFY BY: JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M7075T6B6.000X0.250		Purchased		No		100	f	14.0000	0.809	6.812631			

\*M7075T6B6 000X0 250\*

\*\*

7075-T6 BAR 6.000" X 0.250"

Location

Loc Qty

Loc Code

MAT001

14

123611

2

M127736

12

M128502 X 6.9 smk 14/03/26

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

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Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

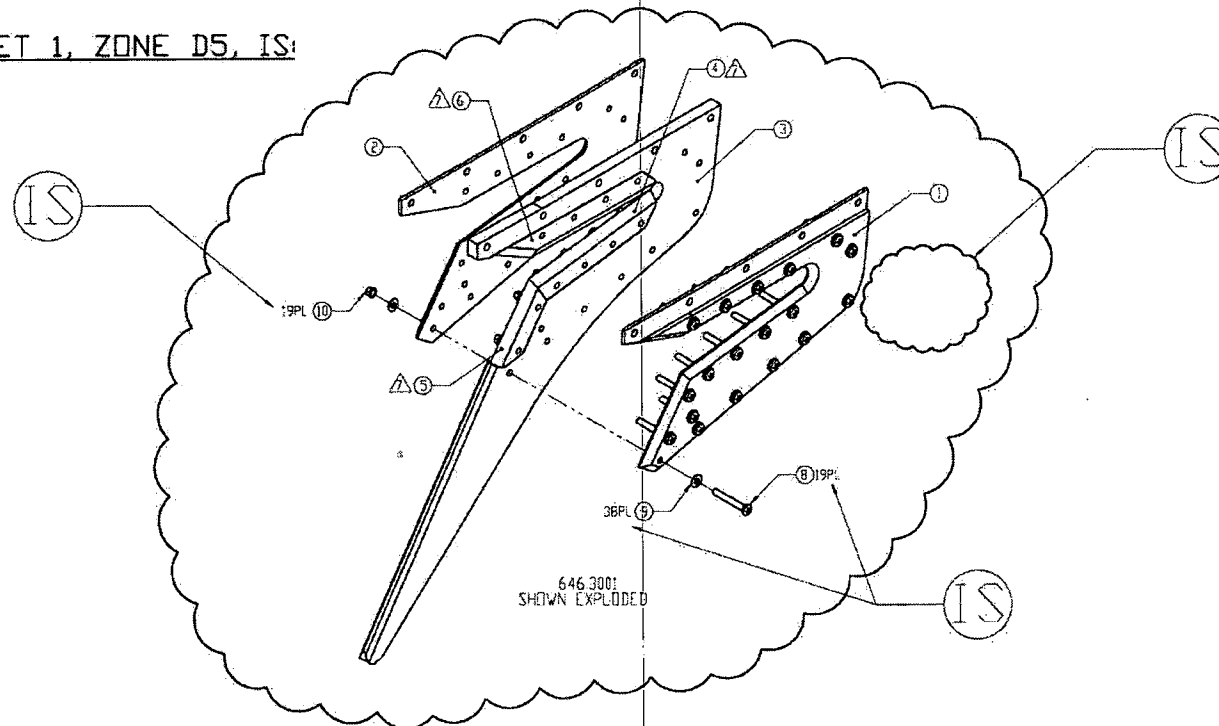
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
--	--	---	--

<b>APICAL</b> INDUSTRIES, INC.	ENGINEERING CHANGE NOTICE NO. 02195		SHEET 1 OF 4	
	DWG NO. 646.3000	REV: N/C	PREPARED BY S. HUFF	DATE: 01/05/09
	DWG TITLE: LOWER CUTTER ASSY		EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.	
	APPROVED BY: ENGR <i>[Signature]</i>	MFG <i>[Signature]</i>	QC <i>[Signature]</i>	EFF: NEXT ORDER
TRANSACTION CODES (TC): A-ADD C-CREATE R-REVISE D-DELETE		REASON: REMOVED RIVETS IN FAVOR OF ADDITIONAL SCREWS		

SHEET 1, ZONE D5, IS:

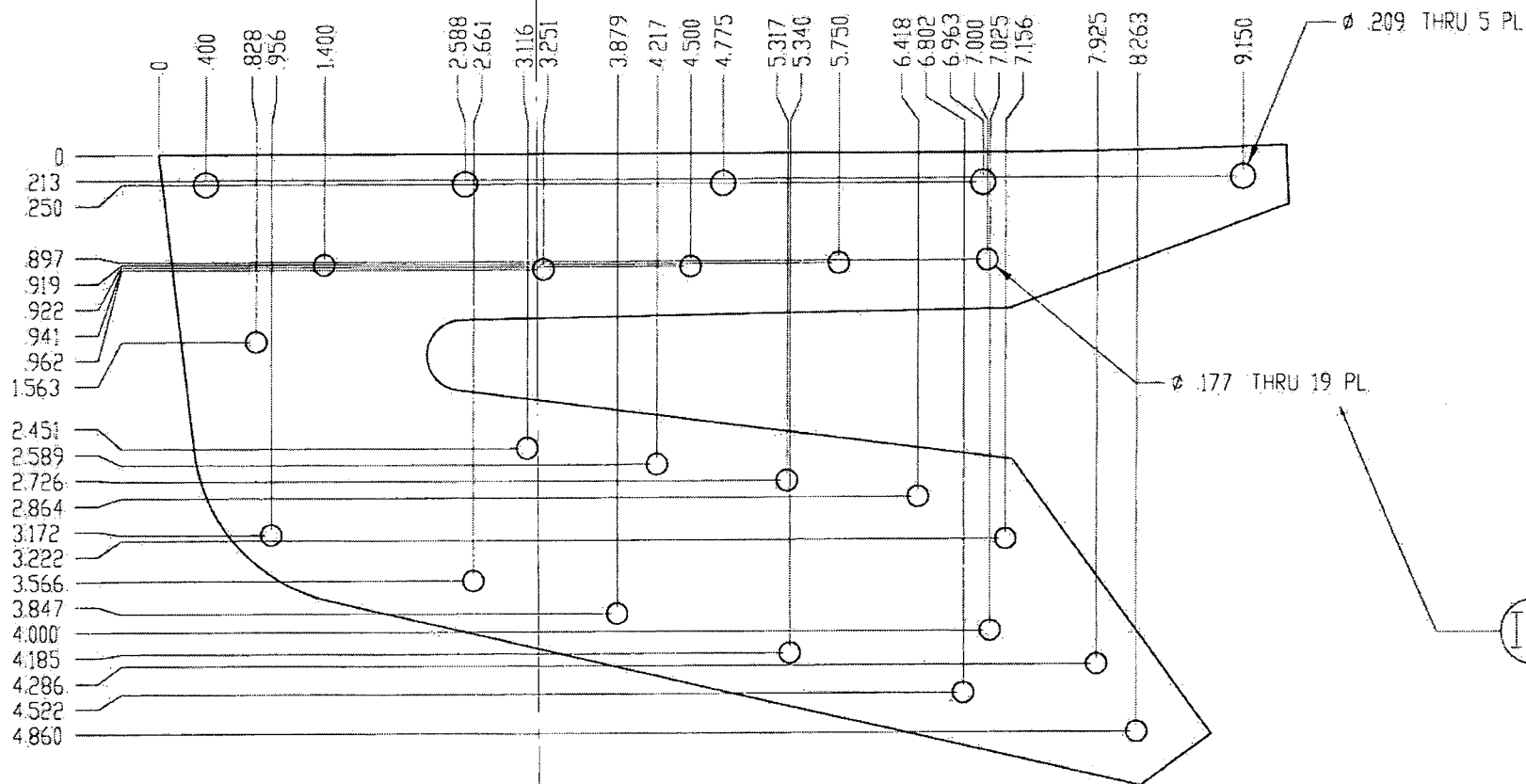


113799 MWS  
14-02-26

10	R	601.1541	19	LOCKNUT	MS21042L08
9	R	601.2764	38	WASHER	NAS1149FN832P
8	R	601.2765	19	SCREW	MS27039-0819
7	D	601.2766	2	RIVET	MS20470AD5-18
			.3001		
F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION
DOCUMENTS EFFECTED:				<input type="checkbox"/> MDL <input checked="" type="checkbox"/> INSTALL INSTRUC <input checked="" type="checkbox"/> ICA <input type="checkbox"/> FMS <input checked="" type="checkbox"/> BOM	CHANGE CATEGORY <input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR
				DER REVIEW REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	



SHEET 3 IS:

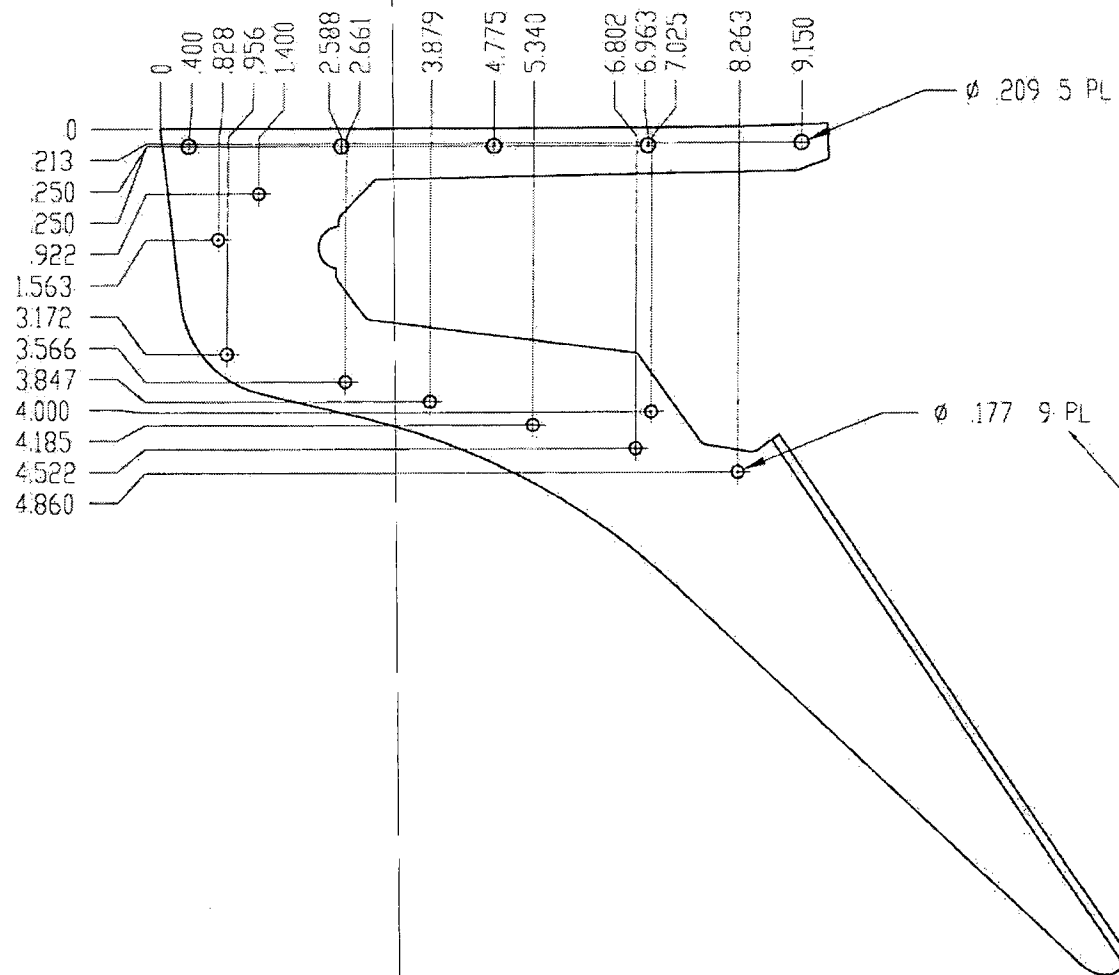


SECTION A-A



F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION

SHEET 5 IS:



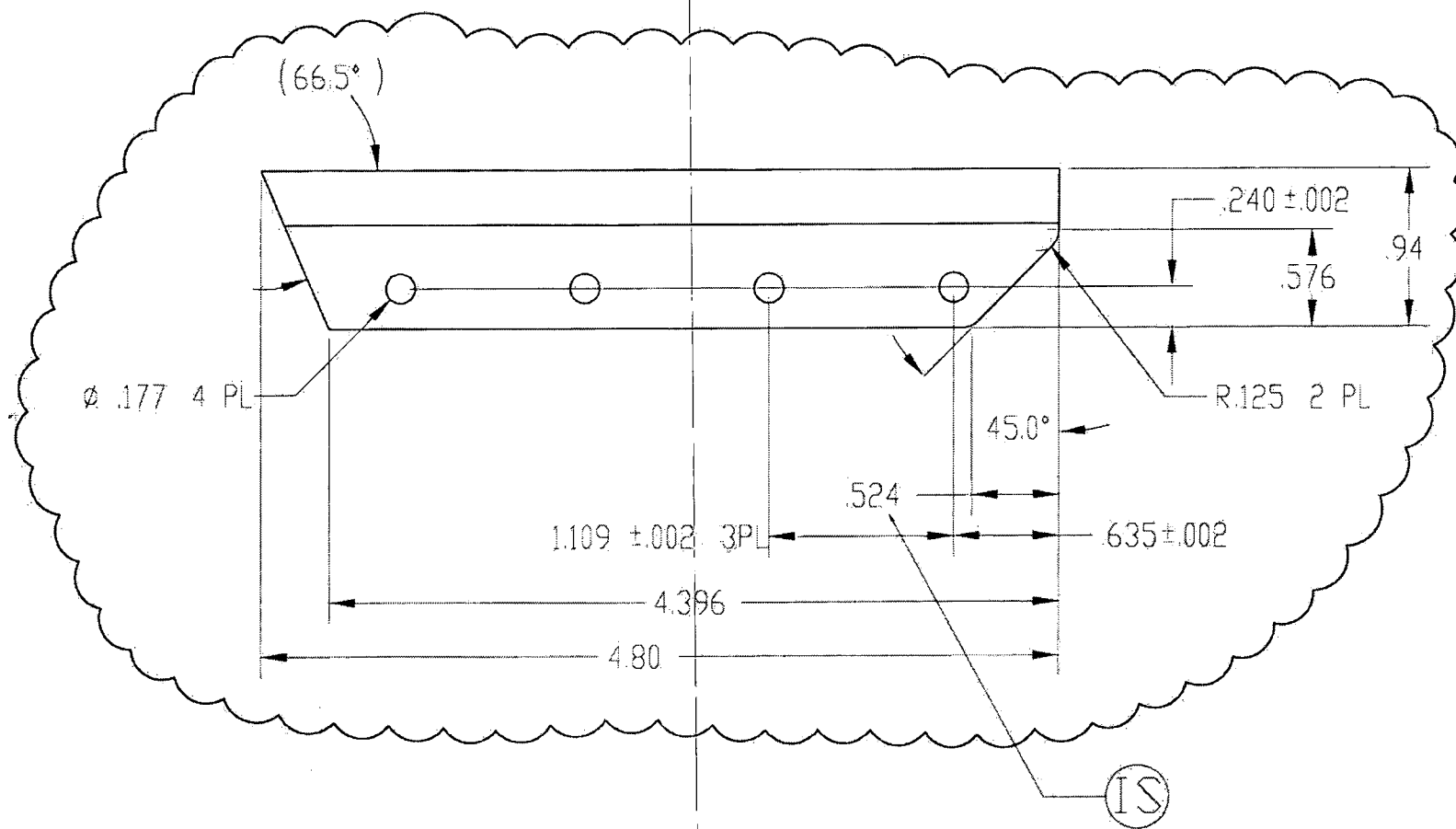
SECTION F-F



F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION



SHEET 6, ZONE C4, IS:



F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION

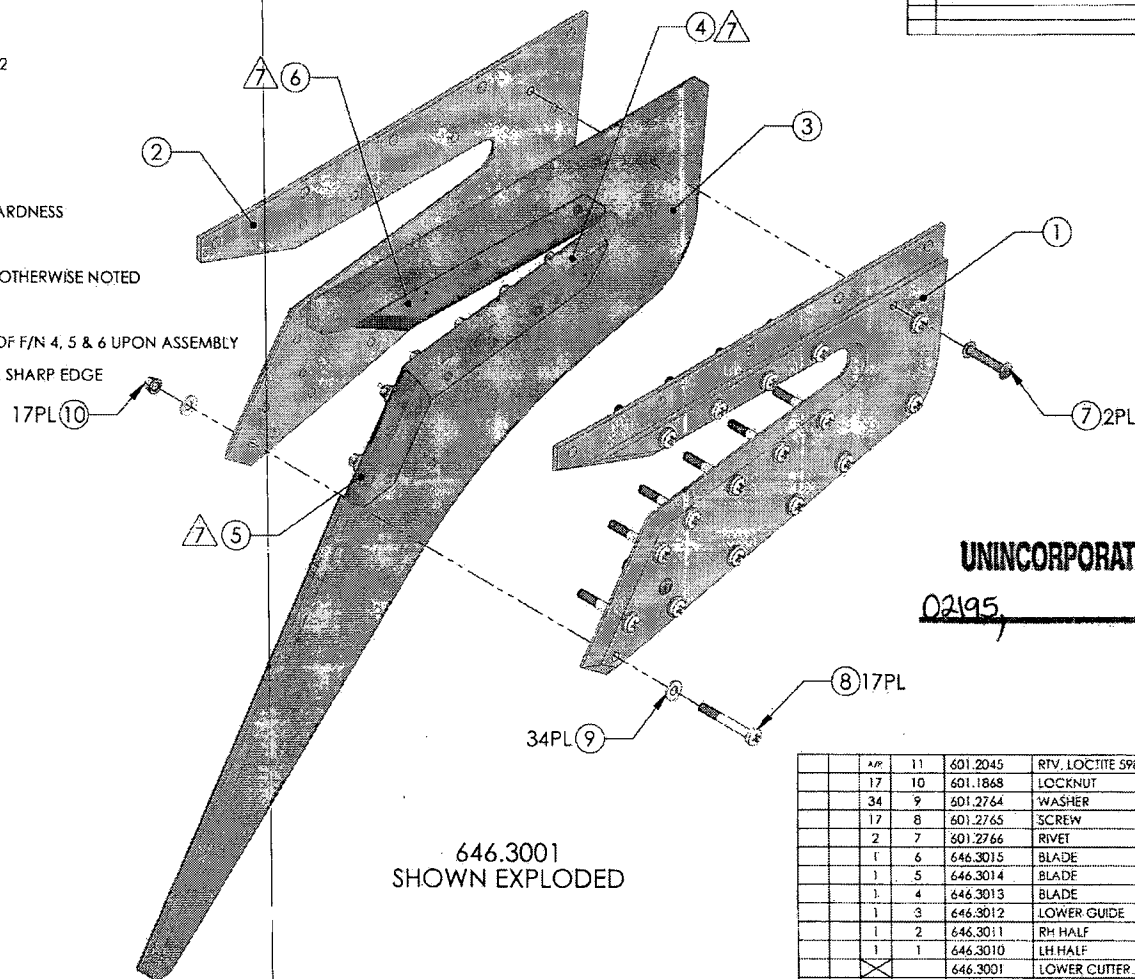




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# NOTES:

- 1 MATERIAL: ALUMINUM 7075-T651 PER AMS-QQ-A-250/12
- 2 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III, CLASS 2, COLOR BLACK;  
CARDINAL 4860-50 PRETREATMENT PRIMER  
PRIME IAW MIL-P-23377J TYPE I CLASS N
- 3 MATERIAL: AISI A2 TOOL STEEL  
CONDITION: ANNEALED  
POST PROCESS: HEAT TREAT TO 58-62 Rc ROCKWELL HARDNESS
- 4 FINISH: PRIME IAW MIL-P-23377J TYPE I CLASS N
5. DEBURR AND BREAK ALL SHARP EDGES EXCEPT WHERE OTHERWISE NOTED
6. IDENTIFY IAW MPP-120
- 7 APPLY F/N 11 AS REQUIRED TO ALL FAYING SURFACES OF F/N 4, 5 & 6 UPON ASSEMBLY
- 8 CUTTING EDGE INTENDED TO BE SHARP, DO NOT BREAK SHARP EDGE



646.3001  
SHOWN EXPLODED

REVISIONS			
REV	DESCRIPTION	DATE	APPROVED

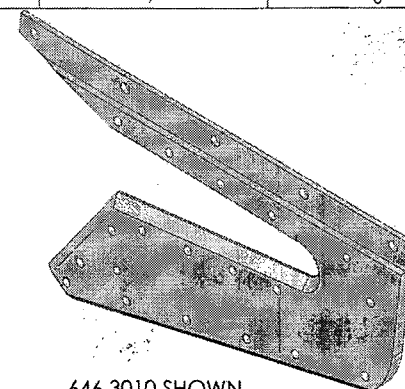
UNINCORPORATED ECN(s)

02195

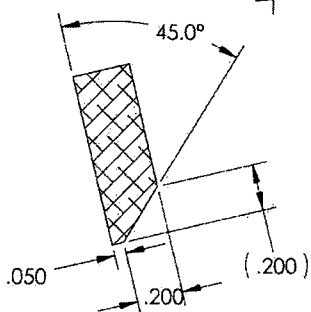
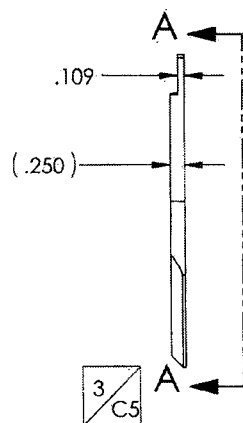
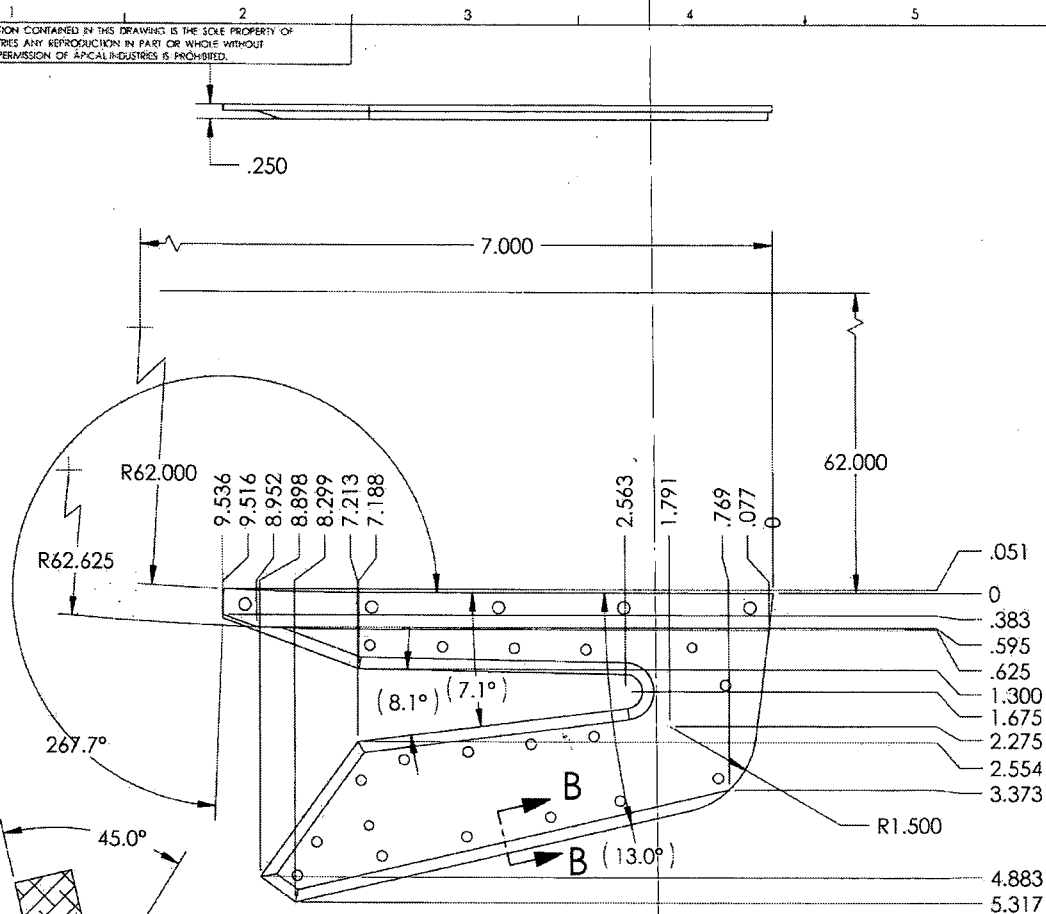
QTY	FIND #	PART #	DESCRIPTION	MAT'L	SPEC.
1	11	601.2045	RTV, LOCTITE 598		
17	10	601.1868	LOCKNUT	MS21043-08	
34	9	601.2764	WASHER	NAS1147F4832P	
17	8	601.2765	SCREW	A421029-0819	
2	7	601.2766	RIVET	MS20410RAD9-18	
1	6	646.3015	BLADE		
1	5	646.3014	BLADE		
1	4	646.3013	BLADE		
1	3	646.3012	LOWER GUIDE		
1	2	646.3011	RH HALF		
1	1	646.3010	LH HALF		
1		646.3001	LOWER CUTTER ASSY		

PARTS LIST		APICAL INDUSTRIES	
646.4000		2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
646.4000		LOWER CUTTER ASSY	
646.4000		REV N/C	
646.4000		SCALE NONE SHEET 1 OF 8	

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646.3010 SHOWN  
646.3011 OPPOSITE

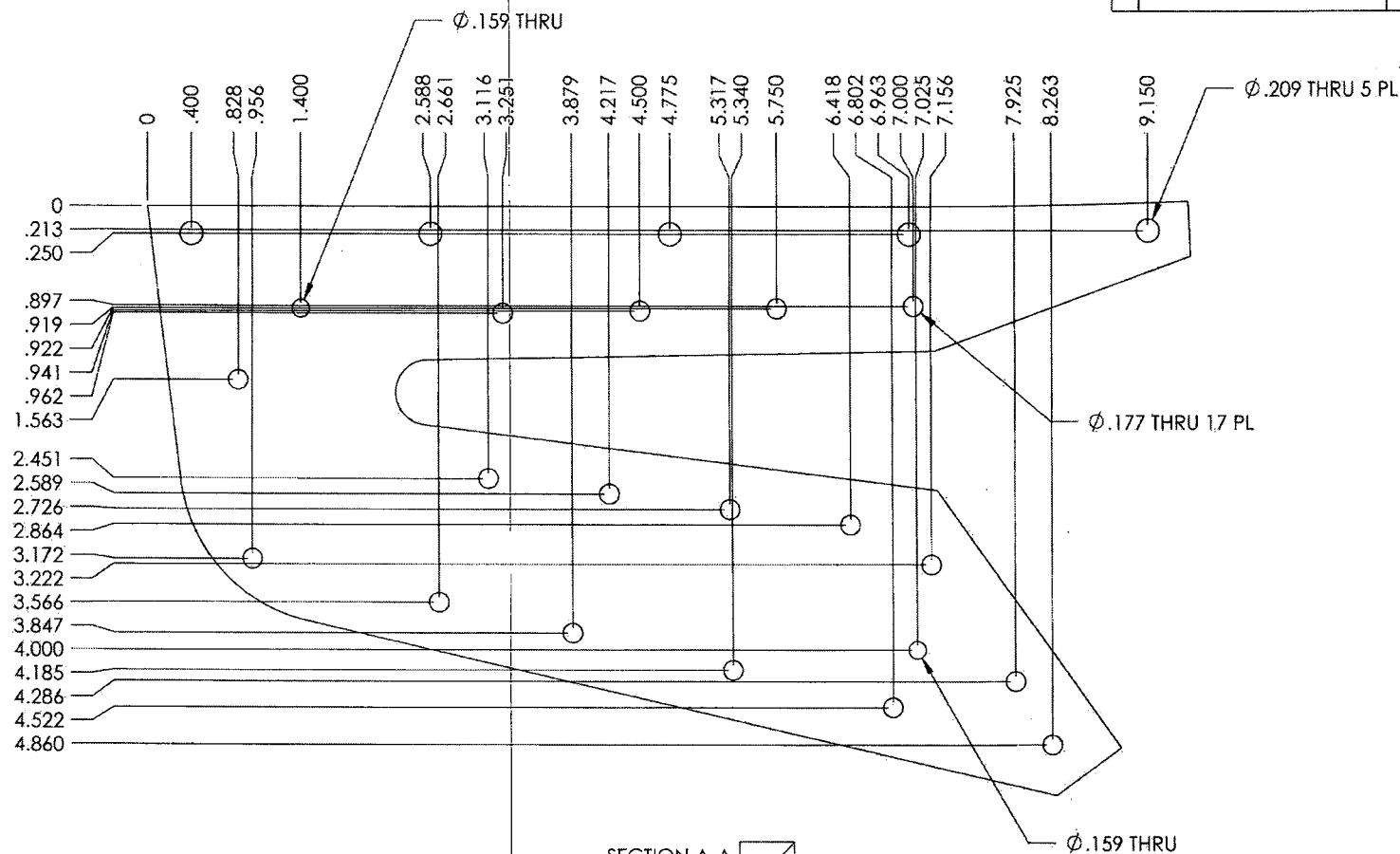


SECTION B-B  
TYP EDGE DETAIL

ORIGINAL DATE: 10/01/91 DRAWN BY: F. BRAYO CHECKED BY: S. JOSEPH DRAWING APPROVAL: S. JOSEPH CONTRACT NO.:		<b>APICAL INDUSTRIES</b> 2408 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 1 PLACE DECIMALS ±.01 2 PLACE DECIMALS ±.005 ANGLES ±.5°		SHEET: B SCALE: NONE	DWG. NO: 646.3000 REV: N/C SHEET: 2 OF 8
LOWER CUTTER ASSY			

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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED

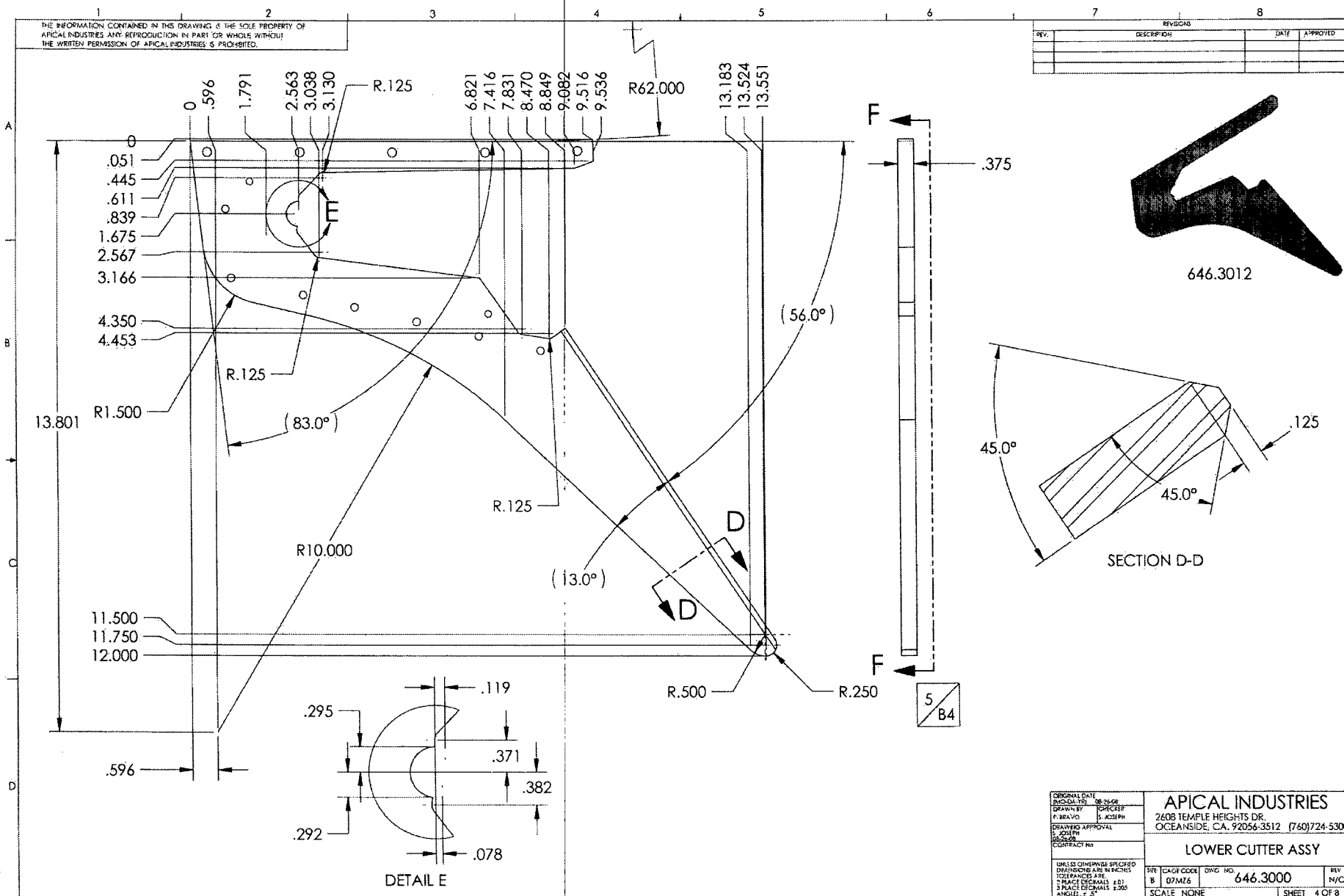


ORIGINAL DATE: 05-14-08 (NO DATE) 05-14-08 DRAWN BY: J. JOSEPH P. BRAVO DRAWING APPROVAL: J. JOSEPH 05-25-08 CONTRACT NO.		<b>APICAL INDUSTRIES</b> 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3312 (760)724-5300	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 1 PLACE DECIMALS ±.015 2 PLACE DECIMALS ±.005 ANGLES ±.5°		SCALE: NONE	SHEET: 3 OF 8
TITLE: LOWER CUTTER ASSY	CAGE CODE: 646.3000	DWG. NO: 646.3000	REV: N/C



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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED

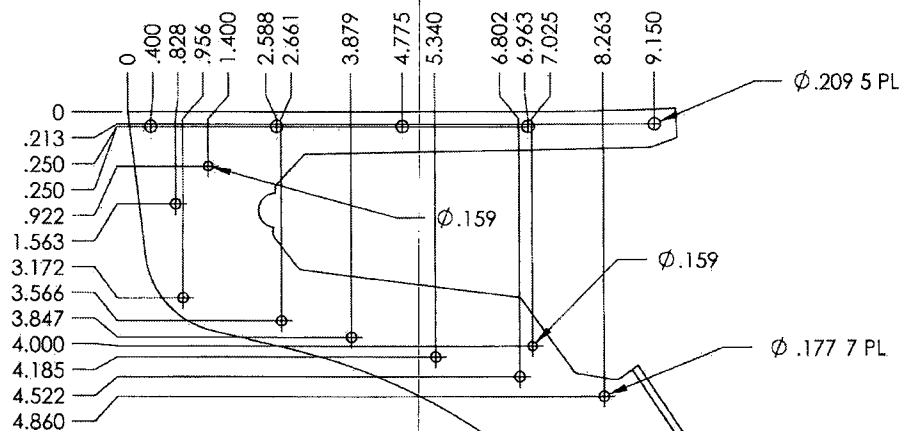


ORIGINAL DATE REVISIONS		APICAL INDUSTRIES	
DRAWN BY: J. JOSEPH		2608 TEMPLE HEIGHTS DR.	
P. BRAVO		OCEANSIDE, CA. 92056-3512 (760)724-5300	
DRAWING APPROVAL		LOWER CUTTER ASSY	
S. JOSEPH		TIT: CAGE CODE: DWG NO: 646.3000	
CONTRACT NO.		REV: N/C	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS .001 2 PLACE DECIMALS .005 ANGLES .2°		SCALE: NONE SHEET: 4 OF 8	



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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



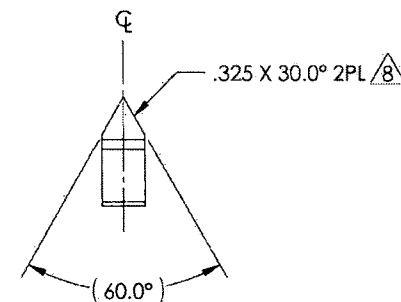
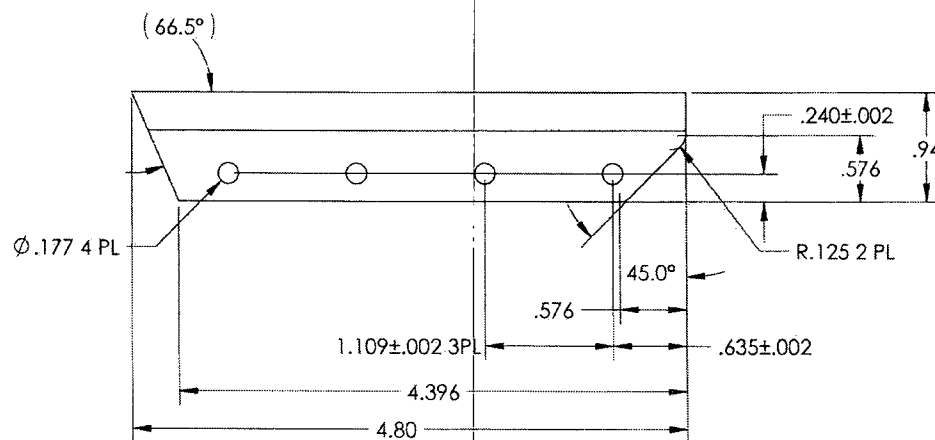
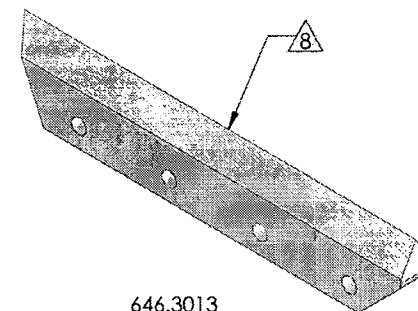
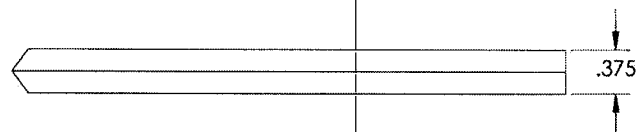
SECTION F-F 4/B6

ORIGINAL DATE (MM-DD-YY) 08-26-08		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300	
DESIGNED BY: J. JOSEPH			
P. BRAVO J. JOSEPH		LOWER CUTTER ASSY	
DRAWING APPROVAL J. JOSEPH 08-26-08			
CONTRACT NO.		SCALE: NONE	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS ANGLES ± .5°			
REV	CAGE CODE	QTY	REV
B	07M65	646.3000	N/C
SHEET 5 OF 8		SHEET 5 OF 8	



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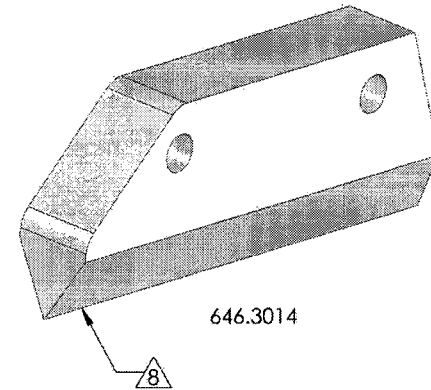
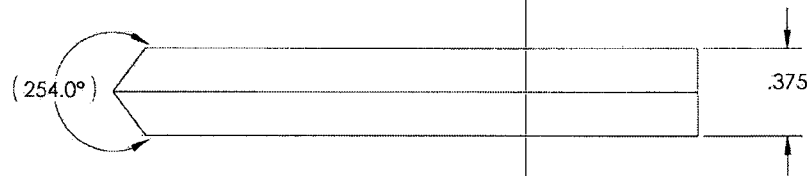
REVISIONS			
REV	DESCRIPTION	DATE	APPROVED



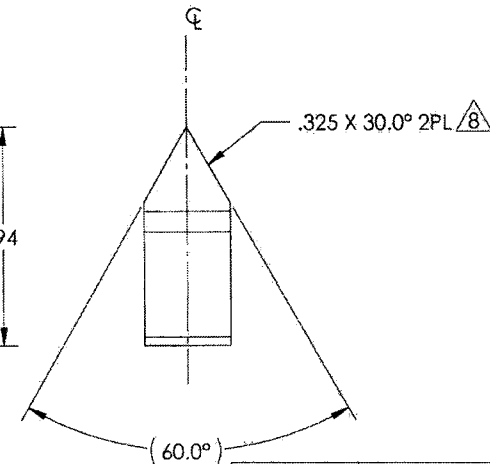
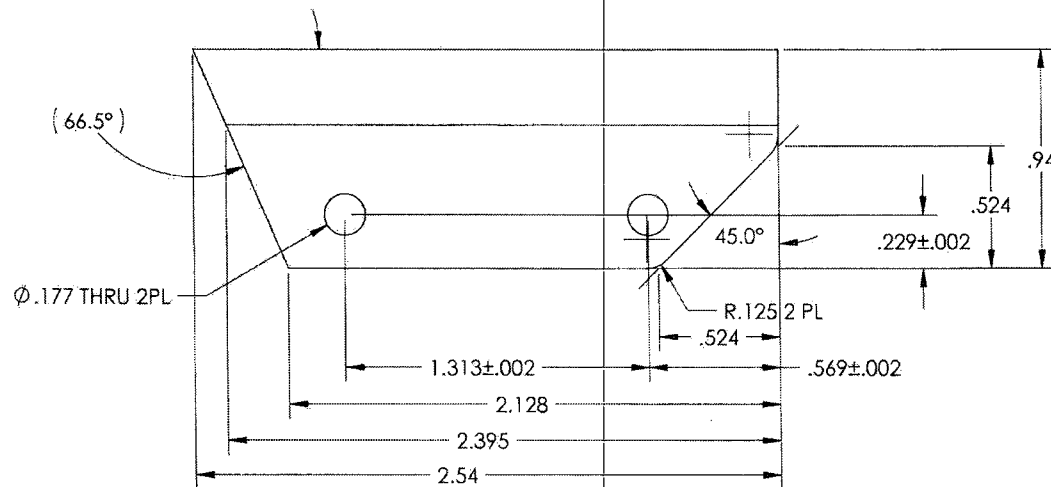
ORIGINAL DATE: 08-20-08 INCHES: 1/8"		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
DRAWN BY: J. BRAYO P. BRAYO		LOWER CUTTER ASSY	
DRAWING APPROVAL: S. JOHNSON 08-20-08		SEE: CAGE CODE: 646.3000 B 07/M16	
CONTRACT NO.		SCALE: NONE	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS $\pm .001$ 2 PLACE DECIMALS $\pm .005$ ANGLES $\pm .5^\circ$		REV: N/C SHEET 6 OF 8	

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REV	DESCRIPTION	DATE	APPROVED



646.3014



DATE: 08-24-08  
DRAWN BY: J. JOSEPH  
CHECKED BY: J. JOSEPH  
APPROVED BY: J. JOSEPH  
CONTRACT NO.

UNLESS OTHERWISE SPECIFIED  
DIMENSIONS ARE IN INCHES  
FRACTIONS ARE  
3 PLACE DECIMALS ±.01  
ANGLES ±.5°

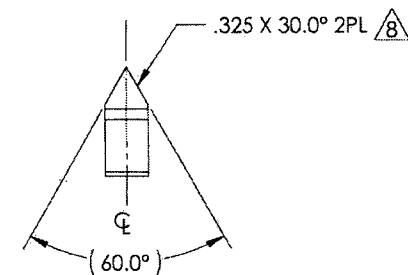
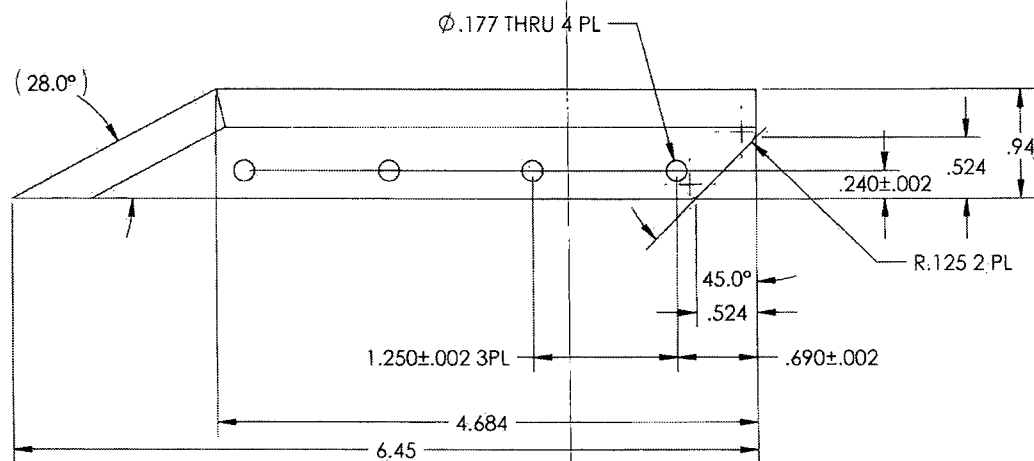
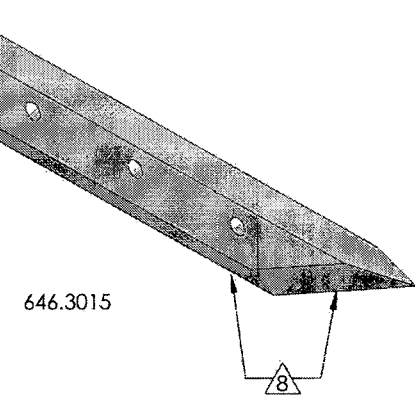
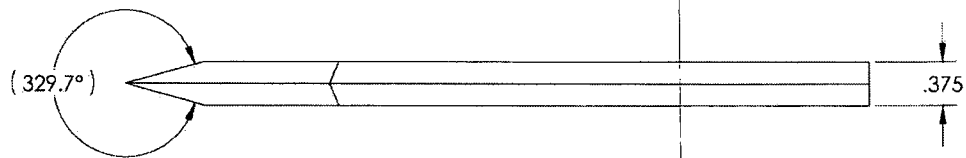
**APICAL INDUSTRIES**  
2608 TEMPLE HEIGHTS DR.  
OCEANSIDE, CA. 92056-3512 (760)724-5300

**LOWER CUTTER ASSY**

SIZE	CAGE CODE	DWG. NO.	REV.
B	07ME6	646.3000	N/C
SCALE: NONE			SHEET 7 OF 8

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REV.	DESCRIPTION	DATE	APPROVED



ORIGINAL DATE: 08-24-08  
DRAWN BY: J. JOSEPH  
P. BRAVO  
DRAWING APPROVAL:  
1. J. JOSEPH  
08-24-08  
CHECKED BY:

UNLESS OTHERWISE SPECIFIED  
DIMENSIONS ARE IN INCHES  
TOLERANCES ARE:  
FRACTIONS DECIMALS  
3 PLACE DECIMALS ±.005  
ANGLES ±.5°

**APICAL INDUSTRIES**  
2608 TEMPLE HEIGHTS DR.  
OCEANSIDE, CA. 92056-3512 (760)724-5300

**LOWER CUTTER ASSY**

REV.	DESCRIPTION	DATE	APPROVED

SCALE: NONE SHEET 8 OF 8









Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO23622

Purchase Order Date 4/3/2014

PO Print Date 4/11/2014

Page Number 2 of 4

**Order From :**

A.T.G. INDUSTRIES INC.  
731 INDUSTRIELLE ROAD  
ROCKLAND, ON K4K 1T2  
CANADA

VC-ATG001

**Ship To :** DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**Contact Name**

**Vendor Phone** 613-446-4544

**Buyer**

Chantal Lavoie

**Customer POID**

**Customer Tax #** 10127-2607

**Ship To Contact**

**Ship To Phone**

**Terms**

Net 30

**Ship Via:**

VENDOR'S TRUCK

**Currency**

CAD

**Ship Acct:**

**FOB**

FCA - (Free Carrier)

3	113799	646.3011 RH HALF	4/18/2014	8.00	\$10.25	\$82.00
---	--------	------------------	-----------	------	---------	---------

Yes  
4/18/2014

FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N

**Line Total:** \$82.00

4	110640	646.3011 RH HALF	4/18/2014	5.00	\$10.25	\$51.25
---	--------	------------------	-----------	------	---------	---------

Yes  
4/18/2014

FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N

**Line Total:** \$51.25

5	113655	646.3012 LOWER GUIDE	4/18/2014	8.00	\$19.90	\$159.20
---	--------	----------------------	-----------	------	---------	----------

Yes  
4/18/2014

FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N

**Line Total:** \$159.20

**Note:**

4/11/2014







A.T.G. Industries Inc.  
731, rue Industrielle Rd.  
PLATING DEPARTMENT  
Rockland, On K4K 1T2  
Canada  
Ph: (613) 446-4544  
Fax: (613) 446-4556

### Pack List

Number: 62979

Date: 11-Apr-14

#### To

DART AEROSPACE LTD  
1270 ABERDEEN ST.  
HAWKESBURY, ON K6A 1K7  
Canada

#### Ship To

DART AEROSPACE LTD  
1270 ABERDEEN ST.  
HAWKESBURY, ON K6A 1K7  
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description		
1 lot	Part: ASST Rev:		
	13 PCS 646.3011 (10.25) <i>578</i> 14 PCS 646.3012 (19.90) 6 PCS 647.1915 (10.50)  HARD ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2  PRIME MIL-P-23377J TYPE I CLASS N  PRICE IS PER PIECE Job: 20140215      PO: 23622      Line:		
<p align="center">Certificate of Conformance</p> <p>A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.</p> <p align="center">ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY</p> <p>DATE : <i>11/4/14</i></p> <p>CERTIFIED SIGNATURE : <i>[Signature]</i></p> <p>RECEIVER SIGNATURE : _____</p>			

